

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	S-B	5C 895	1/25 02-06-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
□	Allowed	I	Interference
- (Through numeral)	Canceled	A	Appeal
+	Restricted	O	Objected

Claim	Date
1	✓ J ✓ J ✓
2	J ✓ J ✓ J
3	J ✓ ✓ J ✓
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48	J J J V J
49	J J J V J
50	V J V V J

Claim	Date
51	J ✓ J ✓ J
52	V J ✓ J
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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